

**Amendments to the Claims:**

The listing of claims will replace all prior versions and listings of claims in the application.

**Listing of Claims:**

Claims 1-23 (canceled)

Claim 24 (previously presented): A method of removing amyloid deposits in a patient comprising administering to the patient an immunoglobulin polypeptide or fragment thereof in an amount effective to remove amyloid deposits, wherein the immunoglobulin polypeptide or fragment thereof binds to an amyloid fibril or component or precursor thereof.

Claims 25-27 (canceled)

Claim 28 (withdrawn): The method of claim 24, wherein the immunoglobulin polypeptide or fragment thereof is raised against an immunoglobulin light-chain.

Claim 29 (previously presented): The method of claim 24, wherein the immunoglobulin polypeptide or fragment thereof opsonizes amyloid fibrils in amyloid deposits.

Claim 30 (previously presented): The method of claim 24, wherein the immunoglobulin polypeptide or fragment thereof is a monoclonal antibody.

Claim 31 (previously presented): The method of claim 30, wherein the monoclonal antibody is a completely human antibody.

Claim 32 (previously presented): The method of claim 30, wherein the monoclonal antibody is a humanized antibody.

Claim 33 (previously presented): The method of claim 30, wherein the monoclonal antibody is a chimeric antibody.

Claim 34 (previously presented): The method of claim 33, wherein the chimeric antibody is a humanized antibody.

Claim 35 (previously presented): The method of claim 30, wherein the antibody is a labeled antibody.

Claim 36 (withdrawn): The method of claim 30, wherein the monoclonal antibody is selected from the group consisting of  $\lambda$ 8 (31-8C7) (ATCC accession number PTA-103),  $\kappa$ 1(57-18H12) (ATCC accession number PTA-104),  $\kappa$ 4 (11-1F4) (ATCC accession number PTA-105), and combinations thereof.

Claim 37 (previously presented): The method of claim 24, wherein the immunoglobulin fragment is a Fv fragment, Fab fragment, F(ab'') fragment, F(ab')<sub>2</sub> fragment, or SvFv fragment.

Claim 38 (previously presented): The method of claim 24, wherein the immunoglobulin is a single chain antibody.

Claim 39 (previously presented): The method of claim 24, wherein the immunoglobulin has cross-isotype reactivity.

Claim 40 (previously presented): The method of claim 24, wherein the immunoglobulin is reactive with a non-light chain amyloid.

Claim 41 (previously presented): The method of claim 40, wherein the immunoglobulin is reactive with Alzheimer's protein A $\beta$ .

Claim 42 (previously presented): The method of claim 24, wherein the patient is a human.

Claim 43 (previously presented): The method of claim 24, wherein the immunoglobulin polypeptide or fragment thereof is reactive with an amyloid fibril other than the amyloid fibril or component or precursor thereof, against which the immunoglobulin polypeptide or fragment thereof was raised.

Claim 44 (previously presented): The method of claim 24, wherein more than one immunoglobulin polypeptide or fragment thereof is administered to the patient.

Claim 45 (previously presented): The method of claim 24, wherein the immunoglobulin polypeptide or fragment thereof is administered with a carrier.

Claim 46 (previously presented): A method of removing amyloid deposits in a patient comprising administering to the patient an immunoglobulin polypeptide or fragment thereof in an amount effective to remove amyloid deposits, wherein the immunoglobulin polypeptide or fragment thereof binds to a non-light chain amyloid fibril.

Claim 47 (previously presented): A method of claim 46, wherein the immunoglobulin polypeptide or fragment thereof is humanized.

Claim 48 (previously presented): A method of claim 46, wherein the immunoglobulin polypeptide or fragment thereof is human.

Claim 49 (previously presented): A method of claim 46, wherein the immunoglobulin polypeptide is a monoclonal antibody raised against an amyloid fibril.